

HOBBS OCD

DEC 09 2019

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>Fulfor Oil & Cattle Co LLC</i>	API Number <i>30-025 1487</i>
Property Name <i>S. Langley 9a1 unit</i>	Well No. <i>2</i>

1. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>K</i>	<i>7</i>	<i>25S</i>	<i>37E</i>	<i>1650</i>	<i>S</i>	<i>1939</i>	<i>W</i>	<i>Lea</i>

Well Status

TA'D WELL YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR <input checked="" type="radio"/> INJ	SWD	PRODUCER OIL	GAS	DATE <i>11/20/2019</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csgng	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	<i>320#</i>
Flow Characteristics					
Puff	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	CO2 ...
Steady Flow	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	WTR ...
Surges	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	GAS ...
Down to nothing	<input checked="" type="radio"/> Y/N	Y/N	Y/N	<input checked="" type="radio"/> Y/N	Type of fluid Inferred for Waterflood if applies
Gas or Oil	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	
Water	Y/ <input checked="" type="radio"/> N	Y/N	Y/N	Y/ <input checked="" type="radio"/> N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>Mike Dennis</i>	OIL CONSERVATION DIVISION
Printed name: <i>MIKE DENNIS</i>	Entered into RBDMS
Title: <i>Operations Mgr.</i>	Re-test
E-mail Address: <i>MDENNIS30820@gmail.com</i>	
Date: <i>11/20/2019</i>	Phone: <i>432 940 1890</i>
Witness: <i>Gay Johnson</i>	

INSTRUCTIONS ON BACK OF THIS FORM